

# Getting the Most from a PPO Health Plan

Important Note: You are required to pay any charges for services provided by a Non-Preferred Provider or another provider which are in excess of the allowable amount, plus all charges for non-covered services.	PERS Select and PERS Choice		PERSCare	
	Preferred Provider	Non-Preferred Provider	Preferred Provider	Non-Preferred Provider
Billed Charge — The amount the provider actually charges for a covered service provided to a member.	\$100,000	\$100,000	\$100,000	\$100,000
Allowable Amount — The allowance or negotiated amount under the Plan for service provided. Note: This is only an example. Allowable amount varies according to procedure and provider of service.	\$35,000	\$35,000	\$35,000	\$35,000
Calendar-Year Deductible — The amount of Allowable Amount the member is responsible to pay each calendar year before Plan benefits are payable.	\$500	\$500	\$500	\$500
Co-payment — The percentage of Allowable Amount the member pays after any applicable deductible is satisfied.	\$3,000 (20% of Allowable Amount until maximum co-payment met)	\$13,800 (40% of Allowable Amount; maximum co-payment is not applicable)	\$2,000 (10% of Allowable Amount until maximum co-payment met)	\$13,800 (40% of Allowable Amount; maximum co-payment is not applicable)
Plan Payment — The percentage of Allowable Amount the Plan pays after any applicable deductible and co-payment are subtracted.	\$31,500 (80% of Allowable Amount until maximum co-payment met, then 100%)	\$20,700 (60% of Allowable Amount; maximum co-payment is not applicable)	\$32,500 (90% of Allowable Amount until maximum co-payment met, then 100%)	\$20,700 (60% of Allowable Amount; maximum co-payment is not applicable)
Remaining Balance — Billed charges exceeding Allowable Amount that the member is responsible to pay.	\$0 (Preferred Provider cannot bill the Member for the difference between Allowable Amount and Billed Charges)	\$65,000 (Non-Preferred Provider can bill the Member for the difference between Allowable Amount and Billed Charges)	\$0 (Preferred Provider cannot bill the Member for the difference between Allowable Amount and Billed Charges)	\$65,000 (Non-Preferred Provider can bill the Member for the difference between Allowable Amount and Billed Charges)
Total Amount the Member Is Responsible To Pay	\$3,500	\$79,300	\$2,500	\$79,300